EXHIBIT No. DATE BILL No

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What if I can no longer work because of the injury or occupational disease?

business, profession or other occupation in the work performed for remuneration in a trade, benefits. Regular employment means recurring be eligible for permanent total disability (PTD) maximum medical improvement (MMI) and you can't return to any regular employment, you may If your physician determines you have reached

social security payment. payments may be reduced by up to 1/2 of your compensation claim, your weekly compensation disability payments as a result of your worker's living increase. If you also receive social security retirement benefits. Benefits are subject to a cost of until you are eligible to receive social security total disability (TTD). Benefits are available The benefit rate is the same as for temporary

DEATH BENEFITS

intormation. or the Department of Labor and Industry for workers compensation insurance provider If an on-the-job injury or an occupational disease is the cause of death, contact your

REHABILITATION BENEFITS

You may be eligible for rehabilitation benefits if:

- you have a permanent medical impairment injury job or a job with similar physical requirements and resulting from your injury or occupational disease and cannot return to your time of
- you suffer an actual wage loss: or
- you have a medical impairment rating 15% or greater and have no actual wage loss.

MISCELLANEOUS

What if I give false information?

obtain benefits is also a crime. initiated. Helping someone else to fraudulently the information on the claim is true. If you obtain be guilty of theft and criminal proceedings can be benefits to which you are not entitled, you may When you sign your FROI, you are confirming

Can I report suspected fraud?

have to give your name. Yes, you can report suspected fraud by calling the fraud hotline at 1-800-922-2873. You do not

compensation benefits if you apply for unemploy purpose of investigating UI fraud and abuse cases The Employment Relations Division may make certain claimant information available to ment compensation. the Unemployment Insurance Division (UI) for the You are obligated to report receipt of workers'

Who provides coverage for my claim?

at (406) 444-6543. pany providing coverage for the employer or you may contact the Employment Relations Division Ask your employer for the name of the com-

RIGHTS & REMEDIES

and Industry - Employment Relations Division, at diation through the Montana Department of Labor insurer, regarding benefits, you may request me-If you disagree with a decision made by your

information on various topics concerning worker's compensation - http://erd.dli.mt.gov Division at (406) 444-6543. Visit our website for you may contact the Employment Relations If you have questions regarding your claim,



Benefits Summary Compensation Workers'

For dates of injury occurring on or after July 1, 2006 through June 30, 2007

Department of Labor and Industry **Employment Relations Division** PO Box 8011 # €

Helena, MT 59604-8041 Phone: (406) 444-6543

RUSINESS & LABOR

INTRODUCTION

The information in this pamphlet is a summary of the most commonly requested information on workers' compensation wage loss and medical benefits available to covered employees injured on the job. It is not all-inclusive.

GENERAL INFORMATION

What is Workers' Compensation?

Workers' compensation is a program designed to:

- provide, without regard to fault, wage loss benefits and medical benefits to workers suffering from a work-related injury or occupational disease;
- return the worker to the work force as soon as possible;
- be easy to access without professional help; and
- provide coverage at reasonably constant rates to employers.

Who is covered?

Workers' compensation insurance is required for most types of employment. If you are injured on the job, you may be eligible for workers' compensation benefits provided you submit the proper claim form on time.



REPORTING REQUIREMENTS

What do I have to do?

Report all on-the-job injuries to your supervisor, insurer or employer as soon as possible. You must give notice within 30 days after the occurrence of the accident. The notice must include the time and place where the accident occurred and the nature of the injury. This 30-day notice requirement does not apply to occupational diseases. We recommend you report minor injuries to your employer whether or not you receive medical treatment.

You must submit a written and signed First Report of Injury (FROI) within 12 months from the date of the accident. You can submit this form to your employer, the workers' compensation insurer or the Department of Labor and Industry. FROI forms are available from your employer, insurer, or the Department of Labor and Industry's website http://erd.dli.mt.gov.

An occupational disease claim must be presented in writing to your employer, insurer or the department within 1 year from the date you knew or should have known your condition resulted from an occupational disease. An occupational disease is a condition caused by events occurring on more than a single day or work shift. The condition must be established by objective medical findings and your employment must be the major contributing cause of the condition.

Upon receipt of your signed FROI, the insurer has 30 days to either accept or deny your claim.

MEDICAL BENEFITS

What medical benefits are provided?

Once the insurer accepts your injury or occupational disease claim, you are entitled to reasonable doctor, hospital, prescription and medical care costs. Allowable charges are paid according to a medical fee schedule. You do not have to pay the

balance between what the medical provider charges and the insurance company pays.

Workers' compensation insurance policies don't allow you complete freedom of choice of medical providers. An insurer contracting with a Managed Care Organization (MCO) can direct you to the MCO for medical care.

Also, insurers will be able to direct you to preferred provider organizations (PPOs) in addition to, or in conjunction with, managed care organizations. After the date your insurer gives you written notice of a preferred provider, the insurer is **no longer liable for charges** if you continue to see the non-preferred provider. If you continue to receive treatment from a non-preferred provider, you, rather than the insurer, are responsible for paying for that treatment.

Prior authorization from the insurer is required for the following:

- a change of physician, or
- any treatment after you have reached maximum medical improvement (MMI), or
- when there has been no treatment for 6 months, or
- for specialized medical care.

Are my medical benefits open forever?

No. Medical benefits terminate when they are not used for a period of sixty (60) consecutive months.

What charges do I have to pay?

After your first visit to an emergency room, you are responsible for \$25 of the cost of each following visit to an emergency room.

You may also be required to pay the difference between name-brand drugs and the generic product if you choose to use the name-brand product. If the generic product is not a therapeutic equivalent or is not available, you will not have to pay the difference. Physicians can no longer

provider charges specify "no products.

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